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TO: U.S. Patent and Trademark Office
Examiner: Kam, Chih Min
Art Unit: 1653

FROM: Lawrence J. McClure

TOTAL NO. OF PAGES, INCLUDING COVER: 4

DATE: August 12, 2004**TIME:** _____

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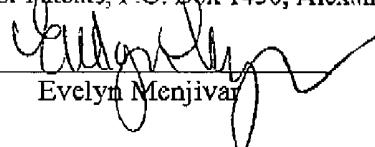
MESSAGE:

Patent Application No.: 10/619,910; Our Ref. 81918.0003

I hereby certify that the following documents:

Response to Restriction Requirement
 Amendment Transmittal Letter

are being facsimile transmitted to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, for filing in the above application.

August 12, 2004Date of Deposit
Evelyn Menjivar**TELECOPY/FAX NUMBER:** 703-872-9306 ART UNIT 1653**CLIENT NUMBER:** 81918.0003**ATTORNEY BILLING NUMBER:** 1966**CONFIRMATION NUMBER:** 571-272-0948 (return fax to Evelyn Menjivar, Ext. 6792)

FORM PTO-1083

Attorney Docket No. 81918.0003
Patent Application No. 10/619,910

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

NISHIMURA et al.

Serial No: 10/619,910

Filed: July 15, 2003

For: A PEPTIDE AND OSTEOREGENETIC ACCELERATOR

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Art Unit: 1653
Examiner: Kam, Chih Min

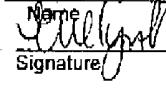
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Name



Signature

08/12/04

Date

Transmitted herewith is a Response to Restriction Requirement in the above-identified application.

 No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE	ADD'L FEE DUE
TOTAL CLAIMS FEE	14	-	20	--	LG=\$18 SM=\$9	\$ 0
INDEPENDENT CLAIMS FEE	2	*	3	--	LG=\$86 SM=\$43	\$ 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS					LARGE ENTITY FEE = \$290 SMALL ENTITY FEE = \$145	\$ 0
					TOTAL	\$ 0

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

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A check in the amount of \$ 0 to cover the additional claims fee is enclosed. A copy of this sheet is enclosed.

A check in the amount of \$ 0 to cover the extension fee is enclosed. A copy of this sheet is enclosed.

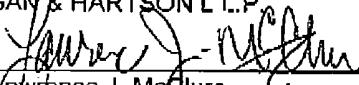
The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1314. A copy of this sheet is enclosed.

Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims

Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted,
HOGAN & HARTSON L.L.P.

By:


Lawrence J. McClure
Registration No. 44,228
Attorney for Applicant(s)

Date: August 12, 2004

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500 South Grand Avenue, Suite 1900
Los Angeles, California 90071
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Aug-12-04 03:34pm From-

Application Serial No. 10/619,910
Customer No. 26021
Response to Office Action Dated 07/13/04

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PATENT

AUG 12 2004 (81918.0003)

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

NISHIMURA et al.

Serial No: 10/619,910

Confirmation No.: 7180

Filed: July 15, 2003

For: A PEPTIDE AND OSTEOREGENETIC
ACCELERATOR

Art Unit: 1653

Examiner: Kam, Chih Min

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RESPONSE TO RESTRICTION REQUIREMENT

Mail Stop AMENDMENT
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Restriction Requirement dated July 13, 2004, Applicant
elects for prosecution SEQ ID NO:11 without traverse.

Application Serial No. 10/619,910
Customer No. 26021
Response to Office Action Dated 07/13/04

PATENT
(81918.0003)

If there are any fees due in connection with the filing of this response, please charge the fees to our Deposit Account No. 50-1314.

Respectfully submitted,

HOGAN & HARTSON L.L.P.

Dated: August 12, 2004

By: Lawrence J. McClure
Lawrence J. McClure
Registration No. 44,228
Attorney for Applicant(s)

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